

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	7-T-8	5-12-95
EXAMINER	300	5-15-95
TYPIST	DM	5-16-95
VERIFIER	Wing	5/17/
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

# INDEX OF CLAIMS

Claim	Date
Final	Original
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BEST AVAILABLE COPY

SYMBOLS  
✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
Final	Original
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